

AUG 19 1891



CALIFORNIA

MEDICAL JOURNAL.

A Monthly Devoted to the Advancement of
Medicine, Surgery, and the Collateral Sciences.

D. MACLEAN, M. D. Editor.

F. CORNWALL, M. D.

M. E. VAN METER, M. D.

Associate Editors.

Address all Correspondence to

California Journal Company, 1422 Folsom St., San Francisco, Cal.

Vol. XII

AUGUST, 1891.

No. 8.

Entered at the San Francisco Post Office, as Second Class Matter.

TABLE of CONTENTS on first page inside of Cover.



CH. MARCHAND'S PEROXIDE OF HYDROGEN (MEDICINAL) H_2O_2 (ABSOLUTELY HARMLESS.)

Is rapidly growing in favor with the medical profession. It is the most powerful antiseptic known, almost tasteless, and odorless. Can be taken internally or applied externally with perfect safety. Its curative properties are positive, and its strength and purity can always be relied upon. This remedy is not a Nostrum.

A REMEDY FOR DIPHTHERIA; CROUP; SORE THROAT, AND ALL INFLAMMATORY DISEASES OF THE THROAT.

OPINION OF THE PROFESSION.

Dr. Geo. B. Hope, Surgeon Metropolitan Throat Hospital, Professor Diseases of Throat, University of Vermont, writes in an article headed "Some Clinical Features of Diphtheria, and the treatment by Peroxide of Hydrogen" (*N. Y. Medical Record*, October 13, 1888). Extract:

"On account of their poisonous or irritant nature the active germicides have a utility limited particularly to surface or open wound applications, and their free use in reaching diphtheritic formations in the mouth or throat, particularly in children, is, unfortunately, not within the range of systematic treatment. In Peroxide of Hydrogen, however, it is confidently believed will be found, if not a specific, at least the most efficient topical agent in destroying the contagious element and limiting the spread of its formation, and at the same time a remedy which may be employed in the most thorough manner without dread of producing any vicious constitutional effect. . . .

"Inasmuch as the efficacy depends upon the ozonized oxygen in solution, it has seemed desirable to rely on the full strength of the officinal preparation of fifteen volumes, especially when used in the fauces where any slight irritation from its acidity is not apparent. In all the cases treated (at the Metropolitan Throat Hospital), a fresh, standard Marchand preparation of fifteen volumes was that on which the experience of the writer has been based. . . .

"An equally important element is in making the application in such a manner as to produce the most determined effect on the diseased tissues with as little local disturbance as possible. . . . A steady, coarse spray, with an air pressure of twenty pounds or more, will, in a few moments' time, produce a more positive action than prolonged efforts to reach the fauces by means of cotton applicators. . . ."

CAUTION.—By specifying in your prescriptions "Ch. Marchand's Peroxide of Hydrogen (Medicinal)," which is sold only in $\frac{1}{4}$ -lb., $\frac{1}{2}$ -lb., and 1-lb. bottles, bearing my label and signature, you will never be imposed upon. Never sold in bulk.

PREPARED ONLY BY

A book containing full explanations concerning the therapeutical applications of both CH. MARCHAND'S PEROXIDE OF HYDROGEN (Medicinal) and GLYCOZONE, with opinions of the profession, will be mailed to physicians free of charge on application.

Mention this publication.

Charles Marchand

Chemist and Graduate
of the "Ecole Centrale
des Arts et Manufactures de Paris"
(France).

SOLD BY LEADING DRUGGISTS. Laboratory, 10 West Fourth Street, New York.

SYR. HYPOPHOS. CO., FELLOWS

Contains the Essential Elements of the Animal Organization—Potash and Lime;

The Oxidizing Agents—Iron and Manganese;

The Tonics—Quinine and Strychnine;

And the Vitalizing Constituent—Phosphorus; the whole combined in the form of a Syrup with a **Slightly Alkaline Reaction.**

It Differs in its Effects from all Analogous Preparations: and it possesses the important properties of being pleasant to the taste, easily borne by the stomach, and harmless under prolonged use.

It has Gained a Wide Reputation, particularly in the treatment of Pulmonary Tuberculosis, Chronic Bronchitis, and other affections of the respiratory organs. It has also been employed with much success in various nervous and debilitating diseases.

Its Curative Power is largely attributable to its stimulant, tonic, and nutritive properties, by means of which the energy of the system is recruited.

Its Action is Prompt: it stimulates the appetite and the digestion, it promotes assimilation, and it enters directly into the circulation of the food products.

The prescribed dose produces a feeling of buoyancy, and removes depression and melancholy; *hence the preparation is of great value in the treatment of mental and nervous affections.* From the fact, also, that it exerts a double tonic influence, and induces a healthy flow of the secretions, its use is indicated in a wide range of diseases.

NOTICE---CAUTION.

The success of Fellows' Syrup of Hypophosphites has tempted certain persons to offer imitations of it for sale. Mr. Fellows, who has examined several of these, **finds that no two of them are identical**, and that all of them differ from the original in composition, in freedom from acid reaction, in susceptibility to the effects of oxygen when exposed to light or heat, **in the property of retaining the strychnine in solution**, and in the medicinal effects.

As these cheap and inefficient substitutes are frequently dispensed instead of the genuine preparation, physicians are earnestly requested, when prescribing the Syrup, to write "Syr. Hypophos. **Fellows.**"

As a further precaution, it is advisable that the Syrup should be ordered in the original bottles; the distinguishing marks which the bottles (and the wrappers surrounding them) bear, can then be examined, and the genuineness—or otherwise—of the contents thereby proved.

Medical Letters may be addressed to:

Mr. FELLOWS, 48 Vesey Street, New York.

California Medical Journal

\$1.00 per Year: Single Copies 15 Cents.

Published by the California Journal Company, San Francisco.

CONTENTS.

ORIGINAL COMMUNICATIONS.			
Lithotrity—Case in practice, by R. A. Hasbrouck, M. D., Salt Lake,	264	Organic Chemistry, by M. H. Logan, M. D. Ph., G.	282
Some Observations on the Therapeutic Action of Remedies, by J. C. Andrews.	267	SELECTIONS.	
Chloroform in Office Pharmacy, by J. G. Pierce, M. D., Sebastopol, Cal.	272	Fissures of the Anus a Cause of Mas- turbation in Childhood,	289
Some Account of an Epidemic of Measles in San Luis Obispo Co., Cal., by G. P. Bissell, M. D.	274	Radical Cure of Umbilical Hernia,	290
Communications from E. H. Mattner, M. D.	276—278	Cyclic Albuminuria,	291
Massage in Obstruction of the Bowels, from Impaction, by M. E. Van Meter,	278	The Tongue,	291
		Erysipelas versus Diphtheria,	292
		Obstruction of the Rectum,	292
		Acute Synovitis,	293
		EDITORIAL.	
		Condemn, Then Adopt,	294
		Rapid Child Bearing,	296
		BOOK NOTES.	298

Advertise in
CALIFORNIA MEDICAL JOURNAL,
The Best Advertising Medium on the Coast.

ALL KINDS OF
PHYSICIAN'S JOB PRINTING

AT THE

California Journal Company's Office.

1422 Folsom Street,

San Francisco.

Country orders promptly attended to

READY FOR DELIVERY FEBRUARY FIRST 1891.

THE
PRINCIPLES OF MEDICINE

AS APPLIED TO

DYNAMICAL THERAPEUTICS

BY

HERBERT T. WEBSTER, M. D.

PROFESSOR OF THE PRINCIPLES OF MEDICINE AND PATHOLOGY; FORMERLY PROFESSOR OF THE THEORY AND PRACTICE OF MEDICINE IN THE CALIFORNIA MEDICAL COLLEGE, ETC., ETC.

*DESIGNED AS AN INTRODUCTION TO THE STUDY
OF ECLECTIC MEDICINE*



PUBLISHED BY THE AUTHOR
AT 855 BROADWAY, OAKLAND, CALIFORNIA

1891

PRICE, IN CLOTH BINDING, POST-PAID, \$2.50.

THE ❖CALIFORNIA*MEDICAL*JOURNAL.❖

VOL XII. SAN FRANCISCO, CAL., AUGUST, 1891. No. 8.

The Board of Examiners of the Electric Medical Society of California, will meet throughout the year regularly at 4 o'clock P. M. on the second Thursday of each month, at the office of GEO. G. GERE, M. D., Secretary 112 Grant, Avenue, San Francisco.

NOTICE TO CONTRIBUTORS.—Write on one side of the paper only. Write plain. When you wish to begin a paragraph at a given word, place before it in your MS the sign ¶. Words to be printed in *italics* should be underscored once, in SMALL CAPITALS twice, in LARGE CAPITALS three times.

Advertisers, Subscribers and Contributors should address all communications to the
CALIFORNIA JOURNAL COMPANY, 1422 FOLSON STREET, SAN FRANCISCO. CAL.

LITHOTRITY—Case in Practice.

R. A. HASBROUCK, M. D. SALT LAKE, UTAH.

CHAS. O. CONNELLY, of Leeds, Utah, twenty-three years old, by occupation a miner up to the 27th of September 1888, when he fell a distance of 115 feet in the shaft of the Keystone mine, Tintic mining district this territory. The fall was such a shock to the system the hospital physicians, I would say judging from the present aspect of ill set bones, must have taken it for granted that death would result—an error into which any of us, under like circumstances would have likely fallen.

While in bed at the hospital the urine was drawn with catheter for the first two weeks as the bladder failed to void the urine.

As a result of the injury the lower three lumbar vertebrae

were fractured, injuring the spinal cord, made manifest by a partial paralysis of the right leg, bladder and rectum.

The recovery from the effect of the fall was rapid and good the muscles of the right leg have wasted away but C. informs me they are filling out day by day, the poise of the body is very good, and since the operation for the removal of stone in the bladder he walks as though in a long distance walking match his record would be good.

After leaving the *hospital* the *bladder* was a source of more or less trouble, blood passing at times, pain therein constant and the urine at all times cloudy. Sometime in August 1890 he passed a stone fave eighth by three-eighths of an inch.

For the bladder trouble he allowed himself to be touched by one or two professionals who with the use of a two dollar microscope arrived at the wise conclusion that it would be to their interest to play the spermatorrhea racket on him.

It worked and he stayed by their treatment until his money failed. In due time he was examined by Dr. Husted, I believe of Silver Reef, Utah, who in caring for him detected vesical calculi and advised a sojourn in Salt Lake sufficiently long to be operated upon. With this history and with this purpose in view the patient came into my hands.

On making an examination by introducing the finger into the rectum a foreign body could be located to the right of the median pubic line extending as high up as the upper edge of the bone, in length from right to left about an inch and a half long by two from below up. This body seemed to be stationary, not changing with the bladder dilated or empty. Using the sound first gave no indication of stone but repeated sounding gave the characteristic sound, though the surface exposed was limited. The examinations clearly showed encysted calculi. The urine passed readily.

Examination of urine by microscope gave no cast of the kidney; chemical analysis showed the urine to be heavy with albumen.

The patient's general health was not good enough to justify an immediate operation, and as two things were desired—the amount of albumen decreased, and the encyst-

ment broken up—the operation was put off. For three weeks the bladder was washed twice daily at first only four ounces of water could be injected but by the tenth day the quantity was sixteen ounces.

As the washing continued the bare surface of the stone became larger until they dropped from their lodging place.

The water injected was acidulated with nitro muriatic acid and the same was given internally in dilute form. At times *rhus aromatica* was given.

The albumen decreased until analysis showed but little. During this time the urethra had been gradually dilated so that at the date of operation the lithotrite passed readily after the mouth had been slip down a little.

On the 27th of April C. was laid on the table for the operation, the lithotrite to be used if possible, or failing to find all satisfactory for its use the supra pubic operation to be resorted to.

Commencing by slitting the urethra for a half inch, we waited (I was assisted by Dr. E. A. Tubbs of this city,) until hemorrhage had ceased before introducing the instrument, which would enable us to tell if injury was done higher up.

No anesthetic was given, as our patient was gritty, and willing to go through lithotrity without its use.

The first grasp of the instrument took up a stone measuring one inch, the second gave a measurement of an inch and a half by the gauge on the handle.

The stones were very hard. For eighteen minutes the fragments were crushed, that being as long as it was advisable to work owing to the nervous strain on patient.

The withdrawal of the instrument gave no trace of blood. C. was laid in bed where he was kept four days. All debris of the stone was passed in three days, coming at first in large quantities, a few pieces measure three-eighths by two eighths inches in size, the most of it being fine flour, grayish in color and very hard when dry.

There was not one minute's indication of unfavorable symptoms, following the withdrawal of the instrument, to the contrary, after the passing of the first large piece, our pa-

tient was free of the agonizing pain which for nearly two years had been gradually taking away his life.

I believe the success attending the removal of the calculi is due to the careful preparation of the patient. C. gained flesh rapidly and is now laying plans for the future.

Repeated soundings show no trace of stone left; but our friend has been advised to wash the bladder frequently, as the danger of new formation exists, as mucus collects upon which new stone might form. The bladder retains a little, heavy urine due to the partial paralysis mentioned above.

Some Observations on the Therapeutic Action of Remedies.

BY J. C. ANDREWS, M. D., SANTA PAULA, CAL.

ENONYMUS.

I HAVE used the Wahoo in a case of masked inter or remittent fever with gratifying success, where quantities of quinine utterly failed. I have also prescribed it in connection with specific tincture of hydrastis \overline{aa} $\overline{3j}$ water $\overline{3jv}$ teaspoonful every three hours, in those cases malarial indisposition, biliousness, deranged stomach, want of appetite, etc., with marked good effect. I regard it as an excellent remedy in those semi morbid conditions of the system, simulating malarial or bilious fever.

To derive the greatest good from the use of this remedy, a close study in the diagnosis is requisite, as with all other remedies.

YERBA SANTA.

THE aromatic syrup is the form in which I use the Yerba Santa, and prize it very much in the subacute or passive form of bronchitis, where there is profuse expectoration with irritating cough, combined with collinsonia canadensis it form a most excellent remedy for these cases as follows:

R.	Aromatic Syrup Yerba Santa	$\overline{3ij}$
	Tr. Collinsonia can	$\overline{3j}$
M.	Sig.—Teaspoonful every three hours, followed by	

some good tonic treatment, will do wonders, together with the vinegar pack to the throat at night, and bathe the head, neck, and breast, wiping dry with a crash towel, with brisk friction upon rising in the morning.

ERIGERON CANADENSIS.

In my first years of practice I carried the oil of Erigeron as a remedy for uterine hemorrhage, combined with the oil of cinnamon as follows:

R.	Oil Erigeron Can	
	Oil Cinnamon	aa 3j
	Alcohol	3ij

M. Sig.—Thirty to Sixty drops on sugar every thirty to sixty minutes until the flow ceased. It is fully as efficacious in epistaxis. It is a most valuable combination. It should be in every physicians obstetric bag.

It has been recommended in diarrhoea of typhoid fever, perhaps as a prophylactic to hemorrhage from the bowels.

ERGOT.

THIS remedy is a staple article with me, in a case of tedious labor, second stage, the uterine throes become inefficient to terminate the labor; vertex presentation, os and soft parts dilated and dilatable, it will be in order to give from xx to xxx drops of a prime article of Fld. Ergot every half hour, until contractions of the womb are aroused sufficiently to expel its contents. I find it an exceedingly valuable remedy in hemorrhages, as hæmaturia, menorrhagia, combined with equal parts of a prime article of fluid hamamelis, administered in one half teaspoonful doses every four hours. In one case of hemorrhage of the kidneys this combination checked it in two days, and has remained so ever since. In the first stage of labor when the pains were inefficient, os unyielding.

R.	Ergot	
	Tr. Lobelia	aa 3ss
	Water	3jv

M. Sig.—A teaspoonful every fifteen to thirty minutes, will arouse the uterus to action that will astonish the natives,

the os will begin to dilate, and the labor will progress, rapidly to successful, termination barring accidents. The study of the action of this remedy should develop other valuable qualities.

It needs to be given with great care, to prevent doing harm, the indications being right, there is no remedy that will give greater satisfaction, and none susceptible of doing more irreparable damage if given without.

GELSEMIUM SEMPERVIRENS.

THE yellow jasmine is one of our staple remedies indeed. In some cases, I would scarcely know how to get along without it. Take the common case, in acute disease, determination of blood to the brain, known by the flushed face, bright eyes, contracted pupils, nervous wakefulness, bordering on convulsions; with a throbbing headache, as though a band were around the head becomes one of our most positive remedies, indeed specific to this condition, in any disease.

In convulsions of children it is the remedy, as well as in that condition of retention, or suppression of urine, with a heavy aching over the kidneys urine scanty and high colored skin dry, nervous system in a state of irritation, restlessness, it has a most happy action. Pulsatilla may be combined with it in some cases with advantage. It is a wonderful remedy.

GUARANA.

My experience with this remedy has been most satisfactory. I have never failed in but two instances to relieve sick headache with the guarana tincture in dram doses, or in tablespoonful doses of the elixir, and those were cases in which the parties were subject to it from early youth, hereditary, both were females, usually one dose was sufficient, rarely the second was needed to relieve and cure the attack.

GOSSYPIUM.

I HAVE used the cotton root tincture in amenorrhea from cold or functional disturbance, with satisfaction, but we have other remedies which answer every purpose and are

more safe in the hands of our patients, such as Pulsatilla, Leontine, Macrotys, however, a fresh tincture is a reliable preparation in careful hands.

HYDRASTIS CANADENSIS.

THERE is no remedy that I prescribe more frequently than the golden seal, and none with better, and more satisfactory results. In the convalescence of fevers, chronic diseases, with debility of mucus membranes, in any part, it imparts a most salutary effect, it seems to go right to the spot, and attend to its work.

It may be combined with nux vomica, chionanthus, acid sol. ferri or any other remedy that the physician may think indicated in the case in hand.

I had most pronounced and happy results with this remedy in stomach troubles of various kinds. I now use the specific tincture more than any other form of the remedy. Equal parts of the sulphate of hydrastia and quinine is in a most excellent combination in some forms of intermittent fevers, or chronic agues. It is a grand old remedy.

HAMAMELIS VIRGINICA.

THE witch hazel is a very mild and prompt astringent in all cases requiring such treatment, combined with a prime article of fluid ergot equal parts of it becomes one of our most certain agents in all passive hemorrhages, whether from the uterus, kidneys, or bowels. It may be used in combination with other agents of known worth in nasal catarrh, or relaxed scrotum, or elongated uvula as a local application, or as a wash in otorrhea. In prolapsus of the rectum equal parts of Lloyd's Hydrastis and a prime article of distillate hamamelis, say two ounces to one drain of tincture of thuja oct. is an unexcelled local application, used as an injection.

The following is an invaluable application in sweating feet, and I presume all have met these cases.

R. Salicylic Acid (Lloyds)	3ij
Bi Borate Soda	3j
Ponds Extract of Witch hazel	3xvj

M. sig.—Apply locally morning and evening, after bathing the feet off with salt and water. It becomes a valuable remedy in hemorrhoids where there is a relaxed condition of the parts involved, as well as a local application as a wash in varicose veins where ulcers are formed from scratching the exzematous and enlarged veins, preparatory to the application of the flannel bandage.

It has other properties doubtless, and has a wide range in the therapeutic field, and will well repay careful study. Its field of action seems to be in that condition of relaxation, poverty of the venus circulation, or wherever a slight stimulant or astringent action is required.

HYDROCYANIC ACID.

I have employed this remedy in obstinate irritation of the stomach with marked good results. I remember a case of endometritis, where the stomach became so irritable that it would not tolerate anything whatever, not even water, a condition of ptyalism existed, (though no mercury had been given) or a hyper secretion of mucus, of any exceedingly tenacious character, when the dilute hydrocyanic acid was given as follows:

R. Hydrocyanic acid dilute	gtts xx
Water	℥vj

M. Sig.—Teaspoonful every thirty to sixty minutes.

The infusion of peach bark from the twigs, late growth, ought not to be forgotten in irritation of the stomach in children with summer complaint. I value it very highly. It is said to be laxative if taken freely.

Chloroform in Office Pharmacy.

BY J. G. PIERCE, M. D. SEBASTOPOL, CAL.

FROM the heading of this paper it might be thought that I was going to attempt an exhaustive treatise. But it is only a few practical points as they have occurred to me in my experience that I wish to give for the benefit of the busy practitioner.

Outside of its general use as an anesthetic it has been used but little in pharmacy or therapeutics. I, as no doubt others, who are in the habit of using the tincture in water or syrup as a vehicle, have been annoyed at finding the solution changed in taste and color after standing in a glass or vial for a few hours. Syrups will not so quickly change but will, often soon ferment in a warm room. I have for several years kept on my shelves a saturated solution of chloroform add to the menstrum to prevent such changes. The solution is prepared by putting one drachm and a half of chloroform in a pint bottle and repeatedly shaking. To three ounces of water or syrup add one ounce of solution, and many days after it will be found perfectly sweet and without change in taste or color. As an antiferment I know of nothing superior and perhaps the least objectional of any, for it does not seem to detract in the least from the action of any remedy it may be used with. If a sweetish taste is not radically objectional to the patient it is more grateful to both palate and stomach than syrup in not leaving an unpleasant taste in the mouth or adding fuel to a ferment in the stomach. As to therapeutic value it may possess, I only know from experience that the solution given alone will arrest gaseous eructations and in many instances arrested vomiting where the small dose of ipecac has failed. Perhaps this may be due to its antiseptic properties or as a stimulant to an atonic condition of the stomach. Upon what principal it acts upon the bronchial and pulmonary organs I do not know. But as an adjuvant and a vehicle in which to administer other remedies

addressed to those parts I am satisfied that I have had better results than when given in water or syrup alone. For the further study of chloroform as a remedy I will add the following extract from the *Munch Med. Woch.*

"More than a year ago Stepp had reported concerning the therapeutic success following the internal administration of chloroform in acute diseases of the digestive organs, chronic gastric ulcer, croupous pneumonia and typhoid fever. At that time his cases numbered only six; they now reach eighteen. In all he gave almost exclusively (once or twice, fifteen grains of quinine) chloroform one gram, diluted to 150, in three doses during the twenty-four hours. No injurious incidental result appeared in any case, although in some the whole amount of chloroform taken during the course of the disease was from ten to twenty grams. On the contrary, the drug acted most favorably as a stimulant; in a few days the somnolence, delirium and dry tongue had disappeared, and in a week or so the temperature had materially lowered, the stages of remitting fever became shortened and gave place to rapid convalescence."

To test the antiseptic properties of chloroform I added to a half pint of syrup that was covered with a white mould, one ounce of the solution. After standing for three days the mould had gathered itself into a conglomerate mass and seemed to be a dead fungii. Removing it, and the syrup standing two weeks longer there is not the slightest appearance of its renewal. Two drachms of the solution in two ounces of sweet milk in a vial and corked is as sweet at the end of forty eight hours as when placed there.

Some Account of an Epidemic of Measles in San Luis Obispo Co. Cal.

BY G. P. BISSELL M. D.

For two months past measles has been raging in the above named county, and many cases have fallen under my personal observation. The disease is said to have worked itself northward from Mexico.

There were some irregular features attending this special visitation, which I propose to mention. Like almost any visitation of Rubeola, it sometimes left after effects in the eyes, ears or lungs, but more rarely than usual.

The irregular features were mostly in the eruption and duration. Some of the sick showed the eruption dark purple, others red as the name implies. In some the eruption was at first very small and fine, or very few and scattering, which would begin to fade only to be succeeded by a full crop of eruption of orthodox propriety. In other cases the eruption was full and the patient got well, apparently, only to be again stricken down with a more severe form. Examples.

An infant one year old under my observation had a fine eruption (that is the eruption was small) and covered the whole surface. The accompanying cough and fever were identical with any mild case. After seven days he was apparently well, only to go through a second course in which the eruption was normal.

A boy of 12 years had the eruption rather sparsely, which ran the usual course and faded, but the next day (the sixth, I think) before the fever declined, again broke out fully on his face, and went through the normal course. Another boy was similarly affected, according to the parents, testimony. I saw him during his second eruption.

I mention one family by name of Froom. On the last Wednesday of April, two boys and one girl were taken down with the disease, and from them their father took the disease;

him I attended. The children had it in a mild form and I was not called in attendance. They all recovered as usual. After two weeks of invaletude the girl went to school a single day and returned sick, when I was called. I diagnosed a second attack, which she had, the eruption showing itself the third day after my visit. It ran its course and spent itself. On the 31st of May the two brothers were again attacked, and it has run its usual course. I have to-day, June 4th just returned from inspecting them. The eruption is true rubeola, and is begining to fade out.

There is another point, yes two, that deserve notice. Many carried the disease in their systems for a month before being taken down, and some only succeeded in inducing the eruption by going to bed and drinking hot teas. The other point is that one of the Froom boys had not been well after his first attack while the other was.

A cousin of the Froom boys was sick when they first were; but did not get well. I told the parents that the poison was not wholly eliminated from his system, and that it was to be hoped that he would be taken down again, but he has not been, and is now reported to be well.

As to treatment, I did not succeed in satisfying myself what was best. To bring the eruption to the surface I had best success with hot drinks. For the cough I had best success with Lobelia and Muriate of Ammonia. Those articles loosened the tough mucus. Many cases would not bear Aconite. In only two or three cases did I have to prescribe for the after cough. Other symptoms were met as they presented. The diarrhoea was controlled with Morphine, Erigeron and Canadensis. Some cases required tonics as after treatment. No deaths occurred.

An Every Day Experience.

Oh, Doctor, come and come right quick
Our only child is very sick;
It has been days since it was well
But what's the matter we can't tell
With your experience and skill
You'll soon discern we know you will.
Perhaps we should have sent before
Though Doctor's bills we do deplore
Yet what were wealth with loved ones lost
Oh save our child *at any cost*.

Yes Doctor, now our child is well—
Our gratitude no tongue can tell.
You certainly performed your part
With all the knowledge of your art
Your skill we'll surely recommend
To every uncle, aunt and friend.

Good morning Doctor; what's your will?
Oh yes, I see you have your bill.
I had not thought of it at all—
Hope you have made it very small.
What! not that much it cannot be
That you have charged so much to me?

I cannot see the reason why
Physicians charges are so high.
Is not the honor they receive
Sufficient pay for what they give?
If sickness shall again annoy
Some other doctor we'll employ.

E. H. M.

The Humbug of Taking Bitters.

THE mode of life of the average American is of such a character that he is constantly in need of a *tonic*. He is rushed at his business, swallows his meals hastily and without any thought as to the capacity of his stomach for digestion, takes little rest, is subject to headache and often takes

a gloomy view of things generally. In such cases he resorts to all kinds of *Bitters* under the delusion that they will act on the secretions of the stomach, and give the system new strength and energy, but nevertheless he keeps on rushing his food down as before.

They may be opposed to the use of what are popularly called stimulants, meaning fermented liquors, and so they lay the flattering unction to their souls that a wine-glassful of some bitter decoction will steady their nerves supply their brain with gray matter and exhilarate them without after depression. A little thought would show them under what a fallacy they are laboring. Most of those so-called *bitters* when subjected to analysis contain 30 per cent of adulterated alcohol and the residum consists of various foreign substances which are simply added as flavoring extracts to disguise the taste of the original compound "and yet physicians prescribe those nostrums."

The value which such bitters are supposed to have is of a purely fictitious character. In fact in time they irritate and injure the membrane of the stomach and so vitiate the taste that the palate cannot soon distinguish between good and bad. It is neither a natural nor a healthy excitement which is produced by these so-called aids to digestion and a wonder is that sensible people, who know a little at least of the operation of natural laws, should allow themselves to be so misled as to what the system really needs.

E. H. M.

Chinese Prescription.

Dr. J. Hun Sue Pech of Peking treats uncomplicated typhoid fever very successfully with the following prescription.

R. Three inches dried umbilical cord

One fried snake-skin

One fresh tom-cats head

Mix. Boil in five pints of water for two hours and strain.

Sig.—One tablespoonful every four hours.

E. H. M.

Why Quacks Prosper.

A prosperous quack was asked by a doctor how it was he had so many customers. The quack took him to his window overlooking a crowded street, and said:

"What proportion of the people passing do you think are sensible persons with well balanced minds?"

"Perhaps one in ten," was the rejoinder. "Just so," said the quack, "and *I get the nine.*"

E. H. M.

Massage in Obstruction of the Bowels from Impaction.

BY M. E. VAN METER, M. D.

Not long ago I was in consultation with two other physicians in a case of fecal impaction. The stomach had become so irritable that nothing could be retained and "coffee ground" vomiting was almost constant. We had tried every thing by mouth and many things per rectum, among others, copious injections of a Sat. Sol. of salts; pint injections of sweet oil with a quart of soap and water and before we knew the trouble was so serious, we had tried some half ounce injections of glycerine. Things were beginning to look desperate and I proposed injecting a pint of coal oil but my two consultants would not agree with me. The injections were all given in the knee chest position through a rectal tube, which was introduced well up and met no obstruction, which, as well as the large amounts of fluid that could be retained, showed that the obstruction was high up. The bowels were immensely swollen, but no tenderness except over the region of the ileo caecal valve where I thought I could feel a tumor but could not be positive on account of amount of tympanitis; no flatus whatever passing per rectum, not even when the injections were returned. While examining the abdomen the thought occurred to me that the ball—if there were one—might be dislodged or at least some of the gas worked off

by manipulation, and as there was no inflammatory trouble to contraindicate rough handling, I began kneading the abdomen by pressing in and grasping and rubbing in direction of course of bowel. I knew that if I displaced the gas from one part it must go to some other place. In a few minutes there was a desire to evacuate the bowels, and when the attempt was made some flatus escaped but nothing else.

She was again put in the knee chest position and I suggested a pint injection of glycerine which we gave. Another attempt at stool showed more or less fecal matter, the odor of which was next to unbearable, there was also expelled with the softer fecal matter, a large amount of seeds. Caraway seed, berry seed, tomato seed and other small seeds, and tomato skins. These had formed the ball, but what passed at this time was only a small part of the whole mass.

Vomiting now ceased; but as there was still considerable tympanitis, we repeated the massage quite often and the glycerine injection twice more four to six hours apart, each time bringing away more of the debris. But the third injection of glycerine got up such an irritation and tenesmus, that we had to inject milk to quell the storm we had raised. After this we contented ourselves with massage and water injections, and the patient went on to recovery. I forgot to mention the fact that she was nourished per rectum from Sunday till Wednesday, the period of obstruction.

The questions that present themselves to me in this case are these. How long had the mass existed before it caused the obstruction? From its odor it must have been six months old. She was subject to alternating fits of constipation and diarrhoea. Is it a common thing for an obstruction of this character to occur above the colon? Was it the massage or the glycerine that had most to do in dislodging and breaking up the mass? Has any one else used such large quantities of glycerine for a similar purpose? Is there likely to be any harm come from such liberal injections of glycerine and if so, what? Would coal oil be a safe injection, using a pint at a time? I think it would. Again, when I have been examining the rectum with patients in the

knee chest position. I have noticed that when I let the air in, the rectum would open up as far as I could see, so the thought has occurred to me that we could get fluids up farther and better by placing the patient in the knee-chest position and injecting air with the fluid or else inject the fluid through a long cylindrical speculum. I cannot see why, other things being equal, the admission of air into the rectum, should not act in a similar manner as when admitted into the vagina, and my observations lead me to think it will. If I am correct, we should have no trouble to fill the colon with fluid simply by elevating the hips high enough; admitting the air, and then injecting the fluid or even pouring it in through a funnel.

If my ideas are so far correct in the premises, we will have much better results, than from the ordinary mode of injections. For my further theory is this. With the patient almost or quite standing on his head, and the air admitted so there will be no vacuum,—for where there is a vacuum, in the animal economy, there is no weight—when we introduce the fluid it will seek its lowest level and continue so to do, till it has met with the obstruction. Then as the space from the obstruction to the anus would fill, the weight of the fluid would distend the bowel at the seat of obstruction; and in seeking to escape, the fluid would, if possible insinuate itself around between the walls of the bowel and the sides of the mass; with these results, viz. exposing a greater surface of the hardened mass to the softening influence of the fluid. Lubricating the bowel. Distending the bowel at and just below the site of obstruction. Thus breaking down, dislodging and facilitating the passage of an impacted mass as no other treatment would.

Of course this line of treatment would only be applicable to cases where the obstruction was seated in the rectum or colon; unless it can be proven that fluids can be made to pass the ileo-cæcal valve from below upward. And I believe if any thing would force the passage of fluid through this valve, without injury to any of the parts, it would be the treatment I have outlined.

I have myself treated and seen other physicians treat many cases, in a partial inverted position, and fill them full of various fluids, but admitted no air, which I believe to be the *sine qua non* to success. The first opportunity that presents itself I shall prove the truthfulness or falsity of my proposition.

Some one try it and report. Another thought occurred to me, when I injected the milk to allay the irritation caused by the glycerine; and it was this. In cases where the stomach is too irritable to retain food, and the patient is suffering for the want of nourishment, why not let all our injections be of milk or some warm broths or soups. I think they would act equally well as the ordinary injections, and every minute they were retained, the patient would be getting nourishment from them which would keep up the strength and would militate greatly against collapse. As often as desired to attempt obtaining a passage a large amount could be injected, which while retained would be importing vitality to the patient, and when evacuated, could be followed by small amounts which would be retained till such time as it might be desired to attempt another passage by large injection.

ORGANIC CHEMISTRY.

BY PROF., M. H. LOGAN, Ph. G., M. D., SAN FRANCISCO, CAL.

Professor of Chemistry and Toxicology, in the California Medical College.

THE SALTS OF AMYL.

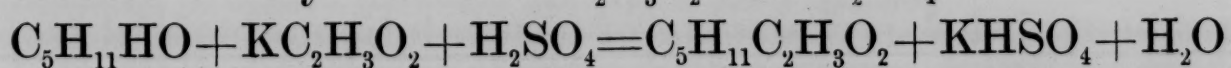
Amyl (Pentyl or Valerial) C_5H_{11} is the radicle of the fifth isologous series.

Pentane (amane) C_5H_{12} has three isomerides. I. **NORMAL PENTANE** $CH_3(CH_2)_3CH_3$ exists in petroleum, and the light tar oils of cannel coal, it is a liquid and boils at 38° . Its sp. gr. at 17° is 0.626. II. **ISOPENTANE** $CH_3CH_2CH(CH_3)_2$ is also present in petroleum. It is a liquid, boiling at 30° and has a sp. gr. of 0.638 at 14° . III. **QUATENRARY PENTANE** (Tetramethyl methane) $C(CH_3)_4$ is a liquid, boiling at 95° and solidifying to a white mass at -20° .

Amyl Ether $(C_5H_{11})_2O$ is of no practical importance at present. The Esters of Amyl are numerous and important.

Amyl Nitrite $C_5H_{11}NO_2$ is produced by heating starch and HNO_3 and passing the gas into Amyl Alcohol. It is also produced by distilling fermentation amyl alcohol with HNO_3 . It is a yellow liquid, boiling at 96° . When the vapors are heated to 250° an explosion takes place. Nascent H changes it into amyl alcohol, and ammonia, heated with methyl alcohol it becomes methyl nitrite and amyl alcohol. It is insoluble in water; and is a powerful cerebral stimulant, administered by the inhalation of its vapors. It is used for an antidote to chloroform narcosis, and other similar states, such as anemia of the brain from any cause. Its vapors are orange colored. Fused KHO converts it into potossium valernate.

Amyl Acetate $C_5H_{11}.C_2H_3O_2$ is produced by the distillation of a mixture of amyl alcohol $KC_2H_3O_2$ and H_2SO_4



When mixed with ethyl alcohol it is known as the artificial essence of Jargonelle Pear or simply as the oil of Pear. It

is purified by digestion with CaO , and rectification over CaCl_2 . It is insoluble in ether, and is decomposed by KHO . It boils at 140° .

Amyl Butrate $\text{C}_5\text{H}_{11} \cdot \text{C}_4\text{H}_7\text{O}_2$ is obtained from normal butyl alcohol. It is a favorite artificial fruit essence, its dilute solution in alcohol forms essence of apricot, raspberry, strawberry and pineapple.

Amyl Valerate $\text{C}_5\text{H}_{11} \cdot \text{C}_4\text{H}_9\text{O}_2$ is a by-product in the manufacture of valerianic acid. The neutralized liquid found floating on the surface of the distillate, during the manufacture of valerate of sodium is chiefly this body. By the action of NaHO it forms sodium valerate and amyl alcohol by a double decomposition. It is an agreeable smelling oily liquid. Its alcoholic solution is the artificial oil of apple. It boils at 196° .

Amyl Sulphuric Acid $\text{H}(\text{C}_5\text{H}_4)\text{SO}_4$ is an ester of H_2SO_4 and is similar to ethyl sulphuric acid.

Amyl Alcohol $\text{C}_5\text{H}_{11}\text{HO}$ is produced in an impure state during the fermentation of potatoes, and is called Fusel oil; a small percent is also found in spirit from raw grain, and all sugars having a starch origin, hence the name amyl.

A few drops of the pure amyl alcohol will produce all the effects of a large quantity of ordinary alcohol, leaving the partaker in a most deplorable condition.

Amyl alcohol is a colorless oily liquid, with a penetrating oppressive odor, and burning taste, sparingly soluble in H_2O , soluble in alcohol, ether and essential oils. When exposed to the air in contact with Pt. black it slowly oxidizes into isovaleric acid.

Theoretically, amyl alcohol has eight isomerides, four primary, three secondary and one tertiary.

THE NORMAL $\text{C}_4\text{H}_9\text{CH}_2\text{OH}$ is obtained from normal pentane. It boils at 137° ; the sp. gr. at 20° is 0.8168; on oxidation it yields normal valeric acid. It forms chlorides and bromides.

INACTIVE AMYL ALCOHOL $(\text{CH}_3)_2\text{CHCH}_2\text{CHOH}$ is the chief ingredient of the amyl alcohol of fermentation, obtained from fusel oil. It occurs as esters of angelic and tiglic acids in Roman Camomile oil. It boils at 131.4° and has a sp. gr. o

0.8104 at 20°; it oxidizes into valeric acid.

ACTIVE AMYL ALCOHOL is about 13 per cent of the fermentation alcohol and boils at 127°.

THE FOURTH PRIMARY AMYL ALCOHOL is very similar to the second or inactive and is known only in the forms of its salts.

THE FIFTH (SECONDARY) is formed by the action of Zn and ethyl iodide, on ethyl formate. It boils at 117° and has a sp.gr. of 0.832 at 0°. The sixth (secondary) boils 118.5° with a sp. gr. of 0.824 at 0°. The seventh (secondary) boils at 112.5, sp. gr. at 0° is 0.833. The eighth (tertiary) boils at 102.5° and solidifies at 12.5°, sp. gr. 0.827 at 0°.

Amyl Aldehyde C_5H_9COH (valer-aldehyde) two are known, the normal $(CH_3)_2(CH_2)_3COH$ is obtained from valeric acid, it boils at 102°. Isoamyl aldehyde $(CH_3)_2CHCH_2COH$ is from amyl alcohol of fermentation, and from isovaleric acid, it is a liquid with a fruit like odor, and boils at 92°.

The Ketone is methyl propyl $C_3H_7COCH_3$ and is formed by the dry distillation of a mixture of acetate and butrate calcium. It resembles common acetone, boils at 103° and at 18° has a sp.gr. 0.808.

Valeric (amylic) acid $C_5H_{10}O_2$. There are four possible isomerides. I, NORMAL VALERIC acid $CH_3(CH_2)_3COOH$ from the oxidation of normal amyl alcohol. It boils at 185° and has a sp. gr. of 0.957 at 0°. II. ISOVALERIC $(CH_3)_2CHCH_2COOH$ is an oily liquid with an odor of old cheese, it boils at 174° and has a sp. gr. of 0.947. III. The third has the valerian odor. It boils at 175° and has a sp.gr. of 0.941 at 20°. IV. The fourth is a leafy crystalline mass melting at 35°, and boiling at 163°. It is soluble in 40 parts of H_2O at 20° and has an odor similar to that of acetic acid.

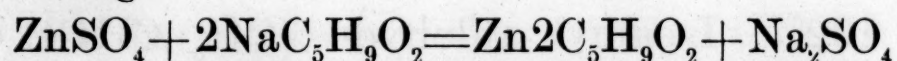
Ordinary Valeric acid occurs free as esters in the animal and vegetable kingdoms, chiefly in the small valerian root (*valeriana officinalis*) and the root of the Angelica Archangelica, Viburnum opulus, Sambucus nigra (Elder) and other plants of the order compositeæ; from which it may be obtained by boiling with water or a weak soda solution. It is also found in Dolphin and other fish oils. Valeric acid combines with H_2O and yields an officinal hydrate $C_5H_{10}O_2 \cdot H_2O$. Valeric

acid has an unpleasant smell, is a colorless oily liquid, strongly acid, soluble in alcohol ether, and in H_2O $3\frac{1}{2}$ per cent. It forms a large number of salts, many of which are valuable.

Oxy Valeric Acid $C_4H_8(OH)COOH$. There are three isomeric acids all similar and rare.

Sodium Valerinate $NaC_5H_9O_2$ is prepared by distilling fusel oil with a mixture of $K_2C_2O_4$ and H_2SO_4 neutralizing the distillate with $NaHO$, evaporating to dryness and fusing at a gentle heat. The $K_2C_2O_4$ and H_2SO_4 yield nascent O. Sodium Valerinate is deliquescent, soluble in alcohol and gives a powerful odor of valerian on addition of dilute H_2SO_4 .

Zinc Valerate $Zn2C_5H_9O_2$ is produced by mixing solutions of the following:



The product is brilliant pearly white tubular crystals, soluble in hot H_2O , alcohol and ether. The most important valerates remaining are the following.

Cupric Valerate	$Cu2C_5H_9O_2$
Bismuth Valerate	$Bi3C_5H_9O_2$
Ferric Valerate	$Fe_26C_5H_9O_2$
Quinia Valerate	$C_{20}H_{24}N_2O_2.C_5H_9O_2$
Ammonia Valerate	$H_4N.C_5H_9O_2$

The valerates are used extensively in medicine for their antispasmodic action on nervous and hysterical subjects, the elixir of the valerate of ammonia is a favorite form in which to administer it. The effect of the salts are generally the combined effect of the elements forming it.

Amyl Flavoring Extracts. VALERIANIAC ETHER (ethyl valerate) $C_2H_5C_5H_9O_2$ —the 5 per cent, solution in alcohol is artificial extract of peach, apricot and melon.

AMYL ACETATE $C_6H_{11}C_2H_3O_2$, a 10 per cent solution in alcohol is pear, a 1 per cent solution is raspberry, a 3 per cent solution is strawberry.

AMYL BUTRATE $C_5H_{11}C_4H_7O_2$, a 1 per cent solution is apricot or raspberry a 2 per cent solution is strawberry and a 10 per cent solution is pine apple.

AMYL VALERINATE $C_5H_{11}C_5H_9O_2$, a 10 per cent solution is lemon and apple.

VALERONITRIL C_5H_9CN , is found in glne. It is the artificial oil of bitter almonds.

SALTS OF HEXYL.

Hexane C_6H_{14} . There are five possible isomerides. The normal exists in petroleum, boiling 71° . Hexanes and most of the salts of Hexyl can be obtained indirectly from mannite.

Hexyl (Caproyl) C_6H_{13} is the grouping of this series.

Hexyl Esters. The primary Hexyl Ether is not known practically. The esters are important.

Hexyl Butrate $C_3H_7.C_4H_8O_2$ occurs together with octyl acetate in some varieties of Heracleum.

Hexyl Acetic Ester $C_2H_3O_2.C_6H_{13}$ occurs in the oil of Heracleum Giganteum; it boils at 170° and has a fruit-like odor.

Hexyl Alcohol $C_6H_{13}HO$. Theoretically there are 17 possible isomerides, eight primary, six secondary and three tertiary. Eight are known at present.

THE NORMAL $CH_3(CH_2)_4CH_2OH$ is obtained from Hexane; it may be prepared from Caproic acid. It boils at 157° and has a sp. gr. of 0.819 at 23° . Normal Caproic acid is its oxidation product.

FERMENTATION HEXYL or Caproyl Alcohol $C_6H_{13}HO$ is found in fusel oil of grape spirit, it boils at 150° .

Hexyl Aldehyde $C_5H_{11}COH$ boils at 128° .

Hexoic or Caproic Acid $C_6H_{11}COOH$ several isomerides are known. Normal Caproic Acid $CH_3(CH_2)_4COOH$ is produced during the fermentation of butyric acid, also from oxidation of normal hexyl alcohol. It exists in goats and cows butter and mutton suet, limberger cheese and cocoanut oil. It is also found in some plants, as the Heraclum, also mangel-wurzel. It is an oily liquid with a sp. gr. of 0.928 at 20° and boils at 205° .

The second is obtained from isoamyl cyanide. It is also found in some fats.

The third may be prepared indirectly from saccharin.

Caproic Acid is a glyceride in cocoanut oil and butter.

SALTS OF HEPTYL.

Heptane C_7H_{16} . Four of the nine possible isomerides are known.

Normal Heptane $CH_2(CH_2)_5CH_3$ is contained in petroleum, and the tar oil from cannel coal. Together with Octane it is the chief ingredient in commercial ligroine, it boils at 19° and has a sp. gr. of 0.6969 at 19° .

A remarkable occurrence of this parrofin in the vegetable kingdom remains to be noticed. On the low mountain chains running parallel to the coast of California, as well as on the slopes of the foot-hills of the Sierra Nevada, the nut-pine or digger-pine (*Pinus Sabiniana* Dougl) grows in magnificent profusion. This tree, the fruit of which is used as an article of food by the Digger Indian, yields a turpentine which has become an article of commerce. For the purpose of procuring the exudation, the tree is notched and guttered during winter at a convenient height from the ground, and the resin obtained subjected to distillation. This yields a very volatile liquid which was recognized by Prof. W. T. Wenzel of San Francisco as a hydrocarbon, to which he gave the name of *abetene*. It has also received the names of aurantine and theoline in the San Francisco market, and it is used instead of benzoline or petroleum benzine for the removal of grease-stains and also as an insecticide. The crude hydrocarbon is a mobile, almost colorless liquid, having a smell resembling orange, and its vapor produces anæsthetic effects on inhalation.

When subjected to distillation it begins to boil about 100° , by far the larger portion coming over at 101° . The residue leaves on further evaporation a brown resin, which has a strong and persistent smell of oranges. When the liquid is shaken up for some time with H_2SO_4 this smell disappears, and the purified *abetene* consists entirely, as Thrope has shown, of pure normal heptane whose physical constants he has most carefully determined. It boils at 98.4° , and at 0° has a sp. gr. of 0.70048, whilst that of its vapor is 3.464. It is remarkable that the substance obtained from petroleum

and purified as carefully as possible, exhibits a higher sp. gr. than that from *Pinus Sabiniano*. This appears to depend upon the fact that petroleum purified by the action of H_2SO_4 and HNO_3 , though consisting principally of the normal paraffins, also contains small quantities of isomeric and homologous hydrocarbons which cannot be removed, and that the heptone obtained from this source containing some of these, thus has a higher sp. gr.

Heptyl Ether, Oenanthylic Ester $\text{C}_2\text{H}_5\text{C}_7\text{H}_{13}\text{O}_2$. In a 5 per cent solution in alcohol this ester forms the artificial essence of peach, in the 1 per cent solution the essence of apricot, cherry, goosberry and raspberry, a 4 per cent solution, essence of green gage plum, a 2 per cent solution black currant, a 10 per cent solution grape. There are many Heptyl ethers and esthers but they are of no importance at present.

Heptyl (Oenanthyl) Alcohol $\text{C}_7\text{H}_{15}\text{HO}$, thirteen of the thirty-eight possible isomerides are known. The normal is from oenanthyl aldehyde obtained from the distillation of castor oil and heptane, it boils at 175° and yields normal oenanthylic acid on oxidation. The second boils at 132° , and forms a hydrate with H_2O . The secondary $[(\text{CH}_3)_2\text{CH}]_2\text{CH OH}$ is the artificial oil of peppermint.

Heptyl Aldehyde $\text{C}_6\text{H}_{13}\text{COH}$, oenanthyl aldehyde, or simply oenanthyl, is produced along with pentecatoic acid in the distillation of castor oil, best under diminished pressure.

Heptoic Acid $\text{C}_6\text{H}_{13}\text{COOH}$. Six of the seventeen possible isomerides are known.

Normal Heptoic or oenanthylic acid $\text{CH}_3(\text{C}_2\text{H}_5)_2\text{COOH}$ is produced by the oxidation of the Heptyl Aldehyde Oenanthol, with HNO_3 .

Octane C_8H_{18} is associated with heptane in petroleum, and the tar oil of cannel coal. Together with heptane it is the chief ingredient in commercial ligroine.

Octyl C_8H_{17} is the group of this series.

Octyl Acetic Ester $\text{C}_2\text{H}_3\text{O}_2\text{C}_8\text{H}_{17}$ is associated with hexyl acetic ester in oil of heracleum giganteum; it boils at 207° and has the odor of oranges.

Octyl Alcohol $\text{C}_8\text{H}_{17}\text{HO}$,

Octyl Aldehyde $\text{C}_7\text{H}_{15}\text{COOH}$ and

Octyl Acid $\text{C}_7\text{H}_{15}\text{COH}$, none of these are of any practical importance at present.

SELECTIONS.

Fissures of the Anus a Cause of Masturbation in Childhood.

Cincinnati Lancet-Clinic, September 13th, 1890.

DR. A. GRIMM reports the following case:

Female child, not quite eleven months old, was brought to him with a history of masturbation of three months' standing. The child was well developed, and, with the exception of a certain degree of anæmia and puffiness about the face, seemed to be perfectly healthy. Before the true nature of the affection was recognized, the mother had often noticed the child, while in a state of momentary abstraction, suddenly stiffen and relax in her arms. Gradually the symptoms become more pronounced. A certain definite position on the arm was sought; the shoulder of the mother would be firmly grasped, and with flushed face and quickened breath a see-saw motion commenced, lasting till the acme of orgasmic excitement was reached. If on the floor the little sufferer would steady the body with her hands, and inclining towards the right side tightly press the legs together. A jerky to-and-fro movement would now begin, the face, as before, flush, and while groaning and panting, and bathed in perspiration, the orgasm would come on, often followed by a fit of crying or quiet sleep. So entirely oblivious of her surroundings was the child that neither the presence of strangers nor scolding could interrupt the action. The attacks would occur from five to ten times a day, but never during sleep. The physician who had first been consulted ascribed the symptoms to the possible presence of pin worms, but anthelmintics proved of no avail. An examination of the genitalia revealed a slight swelling of the labia majora and much redness of the introitus vaginae, with increased moisture. As all symptoms referable to the rectum, such as painful defecation, bloody stools or constipation, were absent, the treatment was directed towards allaying the apparent hyper-sensitiveness of the vaginal tract. Bromide was ordered internally and cocaine in solution and in ointment applied externally. Though the symptoms slightly abated, a cure was not effected.

At this juncture Dr. Forcheimer was called in consultation. A careful examination was made, and over the anal region an induration was distinctly felt, and on forcibly opening the anus several linear fissures were seen just within the sphincter. The parts were touched with nitrate of silver and constantly smeared with an iodoform salve, but the fissures would not heal. Finally, a division of

the sphincter was made, and an iodoform tampon daily introduced into the rectum by means of a speculum, and in two weeks the ulcers healed and masturbation was no longer indulged in.

At this period the child contracted chicken-pox. Not only was the skin studded with characteristic vesicles, but the mucous membranes of mouth and pharynx also participated in the eruption. The disease had scarcely subsided when the child resumed the former practice of masturbation. An inspection of the anal region revealed the same, if not a worse, condition than before, and again the sphincter was divided and the fissures quickly healed, and masturbation ceased.

Radicle Cure of Umbilical Hernia.

Dr. Annibale Nota. *Archivio Ital, di Pediatria*, May, 1890.

SINCE Desault, at the beginning of the century, proposed the treatment of umbilical hernia in children by external ligature of the sac, many plans have been suggested by surgeons all over the world. Multiple ligature, as practiced by Bonchacone and Martin; transfixion and ligature, according to the plan of Lee; torsion of the sac, instead of transfixion, Thierry's modification; lateral compression of the sac, a suggestion of Chicoinau; the subcutaneous ligature of Holmes, and the cutting operation of Burwell. These, and others of the purport, have all proved either inconvenient and objectional or even dangerous.

Dr. Nota has endeavored to improve the original method of Desault, and has adopted a procedure which he has practiced with complete success in all of the eighteen cases in which he has employed it. The hernial sac, after reduction of the bowel and closure of the ring by the finger, is tightly grasped by an assistant between the thumb and index finger. The base of the sac, as close to the abdominal parietes as possible, is then encircled with three or four turns of an elastic rubber tube of 3 mm. outside diameter. The two ends are tied together and still further secured with a ligature of silk. A loose dressing of cotton is applied, and the parents are directed to leave the child perfectly free in its movements and without restraint. On the tenth or twelfth day, according to the size of the hernia, the tube is removed, and the sphacelated sac falls off, leaving a small rounded ulcer. This is dressed with iodoform and cotton, and in four or five days is completely healed, leaving a strong, flat cicatrix, which prevents any further protrusion of the intestine at this point.



Cyclic Albuminuria.

Dr. Huebner, Schmidt's Jahrbucher, 6, page 289, 1890.

IN a paper read before the Leipsic Medical Society, the writer, after a historical introduction, presented two cases of this disease first described by Pavy. The first case was that of a little girl, 11 years of age, who had previously passed through an attack of nephritis following upon scarlatina; the second, that of a boy, 14 years of age, who had had some renal affection after diphtheria. Both patients were strikingly pale and weak. More recently he has also seen three other cases in three sisters, respectively 14, 12 and 10 years of age; here neither scarlatina nor diphtheria had preceded, but an uncle had died from Bright's disease. In these patients there were weakness and symptoms of anæmia. The writer has collected fifty-six cases of cyclic albuminuria, of which twenty-two were children under 15 years, twenty-one were from 16 to 20 years, ten 21 to 30 old, and only three above 30. He concludes as follows:—

1. Cyclic albuminuria is a peculiar and especial form of persistent secretion of albumin by the kidneys;
2. It is not dependent upon a disease of the tissue of the kidneys;
3. It is peculiar to a certain period of the development of the organism;
4. It is provoked by a change from the horizontal to the upright position, then lasting a longer or shorter time to disappear, even with the upright position, the same day;
5. It is merely an expression of a general weak state of the organism, which at the present cannot be more closely explained;
6. Its prognosis is good, provided that the patients receive proper attention.

The Tongue.

The movement of the tongue gives information of the condition of the brain and nervous system; when the tongue is under complete control, can be protruded promptly and decidedly, we know the functions of the brain and nervous system are still unimpaired and free. But when the tongue is tremulous, controlled with difficulty, or is inclined to one side constantly, we know there is cerebral complication and suffering. Immobility, trembling and stammering are signs of cerebral torpor, in consequence of softening of the brain or typhoid conditions.—*Med. Brief.*

Erysipelas versus Diphtheria.

Babtschinsky, Medizina, No. 4, 1890.

The author makes an interesting and possibly beneficent contribution to pathological medicine, as the result of clinical observation and experiment. In 1882, his little son lay at the point of death from gangrenous naso-pharyngeal diphtheria. Just as all hope had been abandoned, a small spot of facial erysipelas appeared upon the nose, and thence spread rapidly to the rest of the face. The next day a wonderful change was apparent. Fever declined, consciousness returned, membrane disappeared from throat and nose, the ulcerated surfaces began to heal, and the case went on to a rapid and complete recovery. Striking as this observation was it received only passing notice; and it was not until, several years later, two analogous cases were observed, that the coincidence arrested his attention. He then determined to inoculate diphtheria patients with erysipelas. His first experiment is worthy of being recorded. Two children of one family sick with scarlatina were attacked with diphtheria. The elder, aged 6 years, died. The younger, aged 3 years, Babtschinsky inoculated under the jaw with blood taken from a patient suffering from facial erysipelas. Twelve hours later erysipelas appeared at the point of inoculation, and with its development the diphtheritic membrane disappeared, fever subsided, and the child made a good recovery. During the year 1888, Babtschinsky inoculated fourteen diphtheritic patients with prepared cultures of erysipelas. Of these patients two died, one five hours, and the other three hours, after inoculation, and before the engrafted disease had developed. In the other cases erysipelas appeared from four to twelve hours after its introduction into the system, and *pari passu* with its development the manifestations of diphtheria disappeared. In all the cases thus treated no medication was employed. In none of the cases of diphtheria, complicated with spontaneous or inoculated erysipelas, has the author observed any grave symptoms due to the latter disease, which was always of a benign type.

Obstruction of the Rectum.

Medical Age, September 10th, 1890.

Dr. W. M. DONALD was called to see an infant, 24 hours old, the mother having been attended by a midwife. The child had been given probably much over an ounce of castor oil in teaspoonful doses, which failed to cause an evacuation of the bowels,

On examination the writer found the abdomen enormously dis-

tended, the child evidently suffering. The anus was patulous and normal, but on passing a probe up the rectum it appeared to terminate in a cul-de-sac, at the distance of about one inch.

The rectum was dilated with a nasal speculum, and dissecting carefully along its course for about one-half inch, the bistoury suddenly made an opening in the obstruction, and an enormous amount of meconium and fæces poured forth.

The opening was enlarged with artery forceps, and every few days for some weeks the author passed a large bougie, thus preventing the wound from closing again. It showed a marked tendency to do this, notwithstanding the fæces passed regularly. Patiedt did well and is now in good health.

Acute Synovitis. .

Dr. Owen (*Practitioner*) describes nine cases of traumatic effusion into the knee-joint, treated by tapping. In some instances the aspirator was employed, but in others he used a hydrocele canula. Strict asepticism was enjoyed, and care taken to prevent the access of air to the joint. He had never known trouble to follow, and employed tapping as a routine treatment in patellar fractures and simple distention.

As a rule the puncture is made to one side of the patella. When withdrawing the canula the track is obliterated by firm pressure with the finger. The skin puncture is covered with a scrap of lint dipped in collodion, or by a little pad of dry wool. The knee, together with the upper half of the leg and the lower half of the thigh, is then enclosed in lateral splints of house-flannel and plaster of Paris. The limb is fixed in the extended position, the foot being slightly raised. The firm pressure which is made around the joint is comforting, and it effectually prevents further effusion into the synovial membrane.

"Having watched the effect of this method of treatment, I can honestly say that, should I have the bad luck to be the subject of acute traumatic hemarthrosis or sero-synovial effusion of the knee, I should most certainly have the joint treated in the manner described. And I should ask that the site of puncture might be first numbed by the application by a little piece of ice and some salt.'

—*Med. Brief.*

EDITORIAL.

Condemn, Then Adopt.

This is the principle which our Allopathic friends have been pursuing for lo! these many years. If we would ask any one of them if this statement is true he would say *no*, in a very emphatic manner. But let us see. There has never been a remedy yet—and there are a great many of them—introduced to professional notice, by an Eclectic or Homœopath, that the *regulars* did not condemn. But would it not make quite a hole in the U. S. Dispensatory—which they say is *the officinal* one—if we would rob it of all the many different remedies which have been tested and introduced by the so-called irregulars. But the amusing part is, that a medicine that was utterly *worthless* or absolutely *poisonous*, while it was yet in the hands of an *irregular*, however often he had proven its virtues, as soon as it has been endorsed and put in the U. S. Dispensatory—the only book that is *officinal* (?)—the whole fraternity adopt it as their child and it is a fine remedy and fills a long felt want; unless it be a remedy they do not understand, in which case they simply adopt it, and wait for some *irregular*, though they would never acknowledge it—to tell then its uses. We remember once, when living in a country town, we had a druggist order some specific pulsatilla. Some of the *regulars* happened to see it, and soon we were honored by the M. D.'s of the town, with the Sobriquet *Pulsatilla*. But now it is an adopted child of theirs and has its room in their “house of many mansions”, the U. S. D.—which you know is *officinal*. But though they have adopted it, they are like the man who drew the elephant for a prize, they do not know what to do with it. This is what appears in a late edition of the U. S. D. “Pulsatilla—We have no exact knowledge of this new officinal. (It was not officinal till they got it in the U. S. D.) It has been employed in Germany and other parts of Europe, especially by the Homœopathic practitioners, by whom the drug is much used for the relief of menorrhœa, dysmenorrhœa, and for other purposes. [*Other purposes* is very definite (?)]

Given in infinitesimal amounts, with due ceremony as to dilution, tumblers, and spoons, to the credulous, hysterical women it may sometimes be of service; but whether it has any other application it is doubtful. “In *one* or *two* (*Italics* ours) trials, very carefully made in nervous dysmenorrhœa it

has failed in our hands absolutely."

Oh consistency thou art a jewel but surely you do not shine in such an outrage on common sense. Why give a drug a place in an *officinal* work, when the authors of that work have no exact knowledge of the actions or uses of the remedy. And especially when it had proven an absolute failure in their hands in *one* or *two* cases, which they seem to think was a fair trial, and which we think is about as fair a trial as they gave anything or person.

But if it has no known virtues why give it a place among those of known reliability? They would as well double the size of their *officinal* dispensatory by giving a place to every herb and weed that grows. What makes a remedy *officinal* anyhow? Is it because it has had its name enrolled in a book which the *regulars* claim as *their* guide? A book full of old and obsolete medicines, whom their own God-fathers will not own, as their adopted children. Why is not a drug just as *officinal* if its history and uses are recorded in King's American Dispensatory as it would be if it had a place in the U. S. Dispensatory?

We imagine we here some one say "because we have no assurance as to the properties of a drug found in King but any we find in the U. S. D. we know have been tested, and investigated, and we can depend on their reliability as to size of dose and medicinal uses." That would be a good thing if true; but just glance back to our quotation from their *officinal* authority and see how much they know about *pulsatilla*. Yet it is *officinal* because they have chosen to give it a place in the U. S. D. Their knowledge, or rather lack of knowledge, of the properties and uses of Bryonia is more ridiculous still.

Have the properties of the Grndelia family changed any since they have been endorsed by the makers of the U. S. D.? Is Cascara Sagrada any more potent to physic since it has fallen into their hands? We opine not. On the contrary, as it is prepared now it is much less effective, than it was as prepared and used by its discoverer.

Here is another. On page 1049 of the U. S. D. (latest edition) can be found the following language, referring to the oil of Erigeron. "It was first brought into notice by the so-called Eclectic physicians, who use it in diarrhoea, dysentery and hemorrhages; and certainly it is a very valuable remedy in hæmoptysis when there is no fever or other marked evidence of constitutional irritation."

The so-called Eclectic Physicians. Why did not the authors

have the moral courage and manhood as well as a sense of honor enough to give credit where credit is due, and say, "This was introduced by the Eclectic Physicians and is certainly a valued remedy"

On another occasion we had ordered some Polymnia ointment, and while yet on the counter of a leading drugstore a couple of Allopaths came in. Neither of them knew what it was, but they picked it up, looked at it, grinned and examined it with as much curiosity as an ordinary man—not a scientific physician—would a jar of carefully powdered dried snakes, from a chinese medicine shop. But it is ever thus and may the good Lord grant that we may all *get there just the same*, in the sweet bye and bye. v.

Rapid Child Bearing.

Almost every day we all have women come to us asking aid, to get rid of a foetus, or for something that will prevent conception. Some of these cases appeal strongly to our sympathies. But what are we to do in such cases. Of course the first proposition can easily be answered, by saying that we are not in the *baby-killing* business; and telling her when she has this one, to "sin no more." But when the first proposition is thus settled, the other immediately springs up, and she will want to know *how* she is to prevent like troubles in the future. Then arises the question shall the physician advise them in the matter? Laying aside the right or wrong in the matter from a moral aspect, what is the real duty of the physician, from a humane stand-point, toward the more unfortunate class of these poor women?

I know there are legal points; moral sentiments and religious creeds all against the man who would have compassion on one of these, long suffering patient women. Yet many of these unholy sentimentalist, who raise their hands in holy(?) horror at such an idea, are every day committing equally baleful sins against their fellow-man, and for much less just provocation.

We all know there are many healthy well-to-do women who have no reason—except the demands of society—for not wanting to rear a family. They will offer every possible excuse; tell all kinds of falsehoods and resort to almost any extreme to accomplish their unwholesome purpose. For such women I have little respect. But it is quite different when some frail little creature presents herself, and tells you that

she has been married six years; has five children and fears she is pregnant again; that each time she has been so dreadfully sick from the time conception took place till relieved by an awful labor from which it took her months to recover. But even with all this horror staring her in the face she says she would not complain if they were able to care for even those they have. That she either has a dissipated worthless man or a very poor manager for a husband. That is he is a poor manager as to providing for his family, but a good manager as to producing one. And if you happen in at her home and see the squalid poverty, and the half naked, half starved children growing up in ignorance, never to be of any use to themselves nor a credit to the community in which they live, you will readily agree with the mother as to how much they need another baby in the house. Others will have a more pitiful story still. One of a drunken sot for a husband who neglects and maltreats her or her children in every possible way. And if she refuses to gratify his every desire he is more abusive still, and with tears in her eyes, and the look of abject servitude depicted on her face she appealingly says "What am I to do?" If this does not touch a man's heart he has none.

One of these poor women came to me only a few days ago. She is twenty-three years old, has had six children and the ages of the last three are as follows, one twenty-five months one fifteen months and one five months and she is now six weeks pregnant. Her husband is a poor laborer seems to be a good, honest man, but has no means. I also attended a woman during her confinement at which she gave birth to a boy, making her seventh living child; she having at the time six girls, the oldest of which was only ten, making seven children in ten years, and for the extra years she had three miscarriages.

I know another poor—in every sense of the term—creature who has had seven children in seven years.

But what are we to do? Even if the laws of God and of the land, would grant us the right, who among us would care to assume the responsibility of setting himself up as judge and dictator and say to this woman you must have three children; another seven; another ten and another none.

Who of us would care to say to some brutal, improvident husband, go on in your lascivious, careless way, gratify every desire without a thought for the future and we will see that you are not burdened with a large family.

While we despise such men and would sorely deprecate

the least encouragement or assistance to them. What are we to do for the poor, helpless women?

What is our real, God sanctioned duty toward them, as fellow human beings? Remember I am not speaking of women who are wedded to society; nor those who sell themselves—and take the chances of maternity—for a few sordid dollars; nor of the so-called, wronged girls, nor of those who are bad because they like to be bad. But I speak of the thousands of unfortunate women, whom the fates seem to be against. Their whole lives have been a drudge and failure, without a ray of hope for anything better in the future. But on the contrary each year adds another care, another helpless burden.

Is it not a wonder they do not become insane, or commit suicide and end all? Man would not stand half so much, and could he be made to lift the responsibility and care off of the poor mother's overburdened shoulders. There would be fewer large families than there now are.

Poor, overworked, sickly—neglected, down cast, suffering, child-bearing woman, what shall we do for her? v

Book Notes.

The Art and Science of Surgery. This is another master-piece by Prof. Howe. We can only say of this work that no Eclectic who makes any pretensions to surgery can afford to be without it. Only the latest and best ideas are set forth in its teachings. Old fallacies are thrown away and only that which a large and successful-experience has proven to be the *sine qua non* in surgical practice presented to operator. See ad. in this Journal, all Eclectic Books.

Diseases of Children. By *J. M. Scudder, M. D.*

The physician who is successful in the treatment of children is a success as a general practitioner. And any one who will follow the teachings of this book can scarcely go astray. Only diseases of childhood are taken up and discussed in a scientific manner and their treatment, is based on a successful experience of many years. See ad. Eclectic Books in back of this Journal.

Subscriptions.

Amounts received during July.

J. W. Hinckle,	\$1.00	J. L. Coombs,	\$1.00
Kate E. McRae,	1.00	J. P. Schmitz,	1.00
W. A. Bixby,	1.00	J. F. Meherrmann,	1.00
G. P. Bisseli,	1.00	A. Veser,	1.00
R. L. Burcham,	1.00	G. G. Gere,	1.00
J. W. Payne,	1.00	Dr. N. Miller,	1.00

Eclectic Medical Books



By **JOHN M. SCUDDER, M. D.**

Eclectic Practice of Medicine.....	Sheep	\$ 7 00
Principles of Medicine.....	"	4 00
Diseases of Women.....	"	4 00
Diseases of Children.....	"	5 00
Specific Medication.....	Cloth	2 50
Specific Diagnosis.....	"	2 50
On the Venereal.....	Sheep	5 00
Materia Medica and Therapeutics.....	"	6 00
Eclectic Family Physician—Cl. \$3.00, Sh. \$4.00, 1/2 Mor.		5 00

By **JOHN KING, M. D.**

American Eclectic Obstetrics.....	Sheep	6 50
American Dispensatory.....	"	10 00
Chronic Diseases.....	"	10 00
Diseases of Women.....	"	3 50
Urological Dictionary.....	"	3 00
Urological Charts.....	Paper	50

By **A. JACKSON HOWE, M. D.**

Art and Science of Surgery.....	Sheep	7 00
On Fractures and Dislocations.....	"	4 00
Operative Gynecology.....	"	4 00

By **JOHN U. LLOYD.**

Chemistry of Medicine.....	Cl. \$2.75, "	3 25
Elixirs.....	Cloth	1 25

By **J. A. JEANCON, M. D.**

Pathological Anatomy.....	1/2 Mor.	20 00
Diseases of the Sexual Organs.....	"	20 00

By **ALBERT MERRELL, M. D.**

Digest of the Materia Medica.....	Cloth	4 00
-----------------------------------	-------	------

By **I. J. M. GOSS, M. D.**

Practice of Medicine.....	Cl. \$5.00	Sheep 6 00
Materia Medica and Pharmacology.....	"	" 6 00

By **GEO. C. PITZER, M. D.**

On Electricity.....	Cloth	1 00
---------------------	-------	------

By **FINLEY ELLINGWOOD, M. D.**

Annual of Eclectic Medicine and Surgery—1890 Issue	"	2 00
" " " " 1891	"	2 35

By **HERBERT T. WEBSTER, M. D.**

Principles of Medicine.....	Cl. \$2.50	Sheep 3 25
-----------------------------	------------	------------

By **J. KOST, M. D.**

Medical Jurisprudence.....	Cloth	2 50
----------------------------	-------	------

Physician's Visiting List with Eclectic Dose Table.....	"	75
---	---	----

Any Book on this List Sent Postpaid on Receipt of Price

BY

JOHN FEARN, M. D.

Oakland,

California.

SPECIFIC * **MEDICINES**

ALWAYS RELIABLE.

THE Remedies of the Eclectic Profession.

DR. H. VANDRE *in an article on "OUR MATERIA MEDICA," read before the Eclectic State Medical Society of California, states as follows:*

"As far as regards specific tinctures, I will say they are far superior to, and far more reliable than the majority of the U. S. P. fluid extracts commonly found in drug stores.

The fluid extracts are often made from old musty and worthless herbs, having lost their identity and all their virtues; hence, if you desire a physiological action and expect any returns I can not recommend too highly Lloyd Bros.' Specific Medicines, from the simple fact that the old school have been using most of our preparations. Having had no results from their fluid extracts, hence they had recourse to the more powerful drugs in our materia medica to accomplish their purpose. Finally as results and comparisons will show, we give less drugs, more to the point and fewer passes to the cemetery."

PHYSICIANS OF THE PACIFIC COAST can obtain Lloyd Bros. Specific Medicines at Cincinnati Prices of the following Dealers convenient to them.

JOHN FEARN, Oakland, Cal.

A. C. TUFTS, Sacramento, Cal.

BOERICKE & RUNYAN, San Francisco, Cal.

SNELL, HEITSHU & WOODARD, Portland, Oregon.

LANGLEY & MICHAELS, San Francisco, Cal.

E. A. AUTENREITH & Co., Yreka, Cal.

W. A. HOVER & Co., Denver, Col.

W. S. HASWELL, Denver, Col.

F. W. BRAUN & Co., Los Angeles, Cal.

C. LAUX, Los Angeles, Cal.

STEWART & HOLMES DRUG Co., Seattle, Wash.

SLAYDEN & WYNKOOP, Tacoma, Wash.

REDINGTON & Co., San Francisco, Cal.

MACK & Co., San Francisco, Cal.

LLOYD BROS., Manuf'rs, CINCINNATI, O.

LACTOPEPTINE is a skillfully prepared combination of Meat-converting, Fat-converting and Starch-converting Materials, acidified with the small proportion of Acids always present in the healthy stomach. It is a most valuable digesting agent, and **SUPERIOR TO PEPSIN ALONE.**—Prof. ATTFIELD, Ph. D., F.R.S., &c., *Prof. of Practical Chemistry to Pharmaceutical Society of Great Britain.*

The most eminent and successful Practitioners consider LACTOPEPTINE the Standard remedy in the treatment



of all those ailments, in which deficient digestion is the direct or indirect cause of pathological conditions.

LACTOPEPTINE.

The most important Remedial Agent ever presented to the Profession, for Dyspepsia, Vomiting in Pregnancy, Cholera Infantum, Constipation, and all diseases arising from imperfect Nutrition.

LACTOPEPTINE IN CHOLERA INFANTUM.

We desire to direct special attention to the great value of LACTOPEPTINE in Cholera Infantum, and other intestinal troubles incident to the heated term. Send address for our Medical Almanac, containing valuable information.

THE NEW YORK PHARMACAL ASSOCIATION,

P. O. Box 1574, New York.